

# COCO'S PET SITTING. Client Trip/Instructions

<http://www.cocospetsitting.com>

951-926-1568

## Section I – Client Name

Full name	_____	
Address	_____	
City	Zip	_____
Home phone	Work	_____
Cell phone	Other	_____
Email address	_____	

## Section II – Trip Information

Departure:	Date:	Time:
Return:	Date:	Time:

Where will you be staying: \_\_\_\_\_

Phone Number where you can be reached: \_\_\_\_\_

*PLEASE PROVIDE A COPY OF ITINERARY IF AVAILABLE*

## Section III – Other Services to be provided

Desired	___ mail	___ newspaper
house/security	___ indoor Plants	___ lights
tasks (check all	___ radio	___ Bird Feeder Maintenance
that apply)	___ trash pick up (what day):	_____

Receive email updates while away?	Yes/email _____	No _____
Digital Pictures:	Yes _____	No _____

**Key Received and Tested By:** \_\_\_\_\_

**Notes:**

**END OF NOTES**

Initials \_\_\_\_\_

**COCO'S PET SITTING.  
Client & Home Profile**

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**Section IV – Home Emergency Information**

**Location of extra key or person with extra key (if no one, may give sitter 2<sup>nd</sup> key):**

Location or Name:

**Person to contact in the event of a home maintenance emergency:**

Name/Phone:

**Person to contact in the event of an emergency to myself and I am unable to attend the pets: (please notify this person)**

Name/Phone:

**Should I be expecting anyone in your home during your absence besides myself?**

If yes, who?

**Is 911 your emergency number for Police/Ambulance/Fire?    Yes    No**

**Section V – Security Information**

Alarm System: Location(s)

Alarm Company/Phone:

Alarm Entry and Exit Code:

Reset Code:

Door Entry (please circle):   Front Door   Side Door   Back Door   Garage Door

To be locked (please circle):   Deadbolt   Door Handle   Both

**Carbon Monoxide Detector:** Please leave instruction manual in case it goes off while I am taking care of your pets. I would need to know the codes for the different readings in order to take the appropriate steps.

Other Security Requests:

**Additional Information:**

# COCO'S PET SITTING.

## Pet Profile

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### Section VI – Pet Information

**Pets #1 Name:** \_\_\_\_\_

**Cat** \_\_\_\_\_ **Dog** \_\_\_\_\_ **Other** \_\_\_\_\_

Age: \_\_\_\_\_ Color: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: F/M Spayed/Neutered

Feeding Instructions:

Medical Condition/Medication:

**Pets #2 Name:** \_\_\_\_\_

**Cat** \_\_\_\_\_ **Dog** \_\_\_\_\_ **Other** \_\_\_\_\_

Age: \_\_\_\_\_ Color: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: F/M Spayed/Neutered

Feeding Instructions:

Medical Condition/Medication:

**Pets #3 Name:** \_\_\_\_\_

**Cat** \_\_\_\_\_ **Dog** \_\_\_\_\_ **Other** \_\_\_\_\_

Age: \_\_\_\_\_ Color: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: F/M Spayed/Neutered

Feeding Instructions:

Medical Condition/Medication:

**Pets #4 Name:** \_\_\_\_\_

**Cat** \_\_\_\_\_ **Dog** \_\_\_\_\_ **Other** \_\_\_\_\_

Age: \_\_\_\_\_ Color: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: F/M Spayed/Neutered

Feeding Instructions:

Medical Condition/Medication:

**Notes:**



# COCO'S PET SITTING.

## Agreement Terms & Conditions

1. The initial term of this agreement shall be from \_\_\_\_/\_\_\_\_/2007 at \_\_\_\_ AM/PM through and until \_\_\_\_/\_\_\_\_/2007 at \_\_\_\_ AM/PM or until the client returns. Upon returning home the client agrees to notify Coco's Pet Sitting of their return. Additional charges may result from any visit or action(s) taken by Coco's Pet Sitting to insure the wellbeing of the pet(s) resulting from the Client's failure to make such notification or failure to return as scheduled. The Client agrees to pay any such charges.
2. The fee(s) will be twenty dollars (\$20.00) for one visit a day, thirty dollars (\$30.00) for two visits a day and Forty dollars (\$40.00) for three visits a day. Visits will normally be a minimum of thirty minutes each. If the client wishes to contract for more than three visits a day or for additional services the fee(s) will be negotiated on an individual basis. The initial number of visits agreed to are \_\_\_\_\_. The estimated total for visits is \$\_\_\_\_\_. Fees for additional services are \$\_\_\_\_\_ bringing the total initial expenditures for this agreement to \$\_\_\_\_\_. Any additional visits or services performed will be at the agreed upon rate. A deposit of one half the total initial expenses will be made at the time this agreement is signed by the parties.
3. Coco's Pet Sitting is authorized to perform care and services as outlined in this contract. Coco's Pet Sitting is also authorized by signature below to seek emergency veterinary care with release from all liabilities related to transportation, treatment and expense(s). Should the specified veterinarian be unavailable Coco's Pet Sitting is authorized to approve emergency medical treatment (excluding euthanasia) at or by another licensed veterinarian or veterinary medical facility. The Client agrees to reimburse Coco's Pet Sitting for any and all expenses incurred by Coco's Pet Sitting resulting from the need to secure medical care for the pet(s). This includes but is not limited to fees associated with additional time expended for transportation, treatment and obtaining supplies related to the medical emergency.
4. In the event of inclement weather or natural disaster, Coco's Pet Sitting is entrusted to use their best judgment in caring for the pet(s) and home. Coco's Pet Sitting will be held harmless for any losses or other consequences related to these decisions. The Client agrees to reimburse Coco's Pet Sitting for any and all expenses resulting from these activities.
5. Coco's Pet Sitting agrees to perform the services stated in this agreement in a reliable and reasonable manner. In consideration of these services the client expressly waives and relinquishes any and all claims for harm or damages against Coco's Pet Sitting and their agents, including but not limited to subcontractors, resulting from the delivery of these services except those arising from gross negligence or willful misconduct on the part of Coco's Pet Sitting. The Client agrees to indemnify Coco's Pet Sitting for all costs associated with litigation arising from services rendered including but not limited to attorneys' fees, service costs and awards or judgments.
6. In the event of personal reasons or illness that prevents Coco's Pet Sitting from fulfilling the requirements of this agreement, the Client authorizes Coco's Pet Sitting to arrange for another qualified person to fulfill said responsibilities as set forth in this agreement. In such cases Coco's Pet Sitting will make all reasonable efforts to notify the Client as soon as reasonably possible of the change in circumstances.
7. All pets are to be currently vaccinated. Proof of such vaccinations shall be provided by the Client before the first visit by Coco's Pet Sitting.
8. Coco's Pet Sitting reserves the right to terminate this contract at any time before or during its term if Coco's Pet Sitting, at their sole discretion, determines that the client's pet(s) poses a danger to the health or safety of any member of Coco's Pet Sitting staff or other person. If such concerns prohibit Coco's Pet Sitting from continuing to care for the pet(s) the Client authorizes Coco's Pet Sitting to place the pet(s) in a kennel or other appropriate facility, with all charges and expenses to be charged to the Client or reimbursed to Coco's Pet Sitting.
9. A handling fee of \$50.00 will be charged on all returned checks. In the event it is necessary to initiate collection proceedings on the account the Client will be responsible for all attorney's fees and costs of collection.
10. The Client authorizes this signed contract to be valid approval for future services for any purpose provided by this contract and authorizes Coco's Pet Sitting to accept telephone reservations for such future services including, but not limited to, entry onto the premises for delivery of service(s) and/or obtaining medical care without additional contracts.

Date: \_\_\_\_/\_\_\_\_/2007

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Coco's Pet Sitting, Authorized Agent Signature